

Exhibit *A*

TTB ID 03238-000-000119		DEPARTMENT OF THE TREASURY ALCOHOL AND TOBACCO TAX AND TRADE BUREAU APPLICATION FOR AND CERTIFICATION/EXEMPTION OF LABEL/BOTTLE APPROVAL (See Instructions and Paperwork Reduction Act Notice on Back)	
1. REP. ID. NO. (If any) 1005		CT 101	OR 22 1005
2. PLANT REGISTRY/BASIC PERMIT/BREWER'S NO. (Required) DSP-KY-113		PART I - APPLICATION	
3. SERIAL NUMBER (Required) YEAR 0 3 - 9 0 1		7. NAME AND ADDRESS OF APPLICANT AS SHOWN ON PLANT REGISTRY, BASIC PERMIT OR BREWER'S NOTICE. INCLUDE APPROVED DBA OR TRADENAME IF USED ON THE LABEL (Required) Buffalo Trace Distillery, Inc. 1001 Wilkinson Boulevard Frankfort, Kentucky 40601 dba: Old Charter Distillery Co.	
4. TYPE OF PRODUCT (Required) <input type="checkbox"/> WINE <input checked="" type="checkbox"/> DISTILLED SPIRITS <input type="checkbox"/> MALT BEVERAGE		7a. MAILING ADDRESS, IF DIFFERENT	
5. BRAND NAME (Required) Old Charter			
6. FANCIFUL NAME (If any) Kentucky Straight Bourbon Whiskey			
8. EMAIL ADDRESS		9. FORMULA/SOP NO. (If any)	
10. LAB. NO. & DATE/PRE-IMPORT NO. & DATE (If any)		17. TYPE OF APPLICATION (Check applicable box(es)) a. <input checked="" type="checkbox"/> CERTIFICATE OF LABEL APPROVAL b. <input type="checkbox"/> CERTIFICATE OF EXEMPTION FROM LABEL APPROVAL "For sale in _____ only" (Fill in State abbreviation) c. <input type="checkbox"/> DISTINCTIVE LIQUOR BOTTLE APPROVAL. TOTAL BOTTLE CAPACITY BEFORE CLOSURE _____ (Fill in amount) d. <input type="checkbox"/> RESUBMISSION AFTER REJECTION TTB ID _____	
11. NET CONTENTS 750-ML	12. ALCOHOL CONTENT 40%/80°	13. WINE APPELLATION (If on label)	
14. WINE VINTAGE DATE (If on label)	15. PHONE NUMBER (502) 223-7641	16. FAX NUMBER 502) 875-5553	
18. SHOW ANY WORDING (a) APPEARING ON MATERIALS FIRMLY AFFIXED TO THE CONTAINER (e.g., caps, celloseals, corks, etc.) OTHER THAN THE LABELS AFFIXED BELOW, OR (b) BLOWN, BRANDED OR EMBOSSED ON THE CONTAINER (e.g., net contents, etc.). THIS WORDING MUST BE NOTED HERE EVEN IF IT DUPLICATES PORTIONS OF THE LABELS AFFIXED BELOW. ALSO, PROVIDE TRANSLATIONS OF FOREIGN LANGUAGE TEXT APPEARING ON LABELS.			

PART II - APPLICANT'S CERTIFICATION

Under the penalties of perjury, I declare: that all statements appearing on this application are true and correct to the best of my knowledge and belief; and, that the representations on the labels attached to this form, including supplemental documents, truly and correctly represent the content of the containers to which these labels will be applied. I also certify that I have read, understood and complied with the conditions and instructions which are attached to an original TTB F 5100.31, Certificate/Exemption of Label/Bottle Approval.

19. DATE OF APPLICATION August 22, 2003	20. SIGNATURE OF APPLICANT OR AUTHORIZED AGENT <i>J. A. Wallace</i>	21. PRINT NAME OF APPLICANT OR AUTHORIZED AGENT Attorney in Fact
---	--	--

PART III - TTB CERTIFICATE

This certificate is issued subject to applicable laws, regulations and conditions as set forth in the instructions portion of this form.

22. DATE ISSUED AUG 27 2003	23. AUTHORIZED SIGNATURE, ALCOHOL AND TOBACCO TAX AND TRADE BUREAU <i>Shirley Ayers</i>
---------------------------------------	--

FOR TTB USE ONLY

QUALIFICATIONS

EXPIRATION DATE (If any)

AFFIX COMPLETE SET OF LABELS BELOW (See General Instructions 4, 6 and 7)

